

Tipton Twister

IDHS State-Level Exercise

September 22nd – 27th



Incident Action Plan (IAP)

IAP-004

September 26, 2013

Incident Objectives (ICS 202)

1. Incident Name: Tipton Twister	2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000	
3. Objective(s): Ensure the health and safety of all exercise participants. Conduct an exercise in accordance with HSEEP principles. Provide realistic exercise scenarios that force players to think, react, and make decisions, in a highly-dynamic exercise environment. Ensure that exercise conduct creates an environment that requires the players to use effective resource management. Provide an adequate environment for district response task forces to establish camp, for tactical resources, at COB panther. Evaluate operational processes of the tactical resources participating in this exercise. Evaluate the response of the players and document lessons learned and best practices for AAR purposes.		
4. Operational Period Command Emphasis: It is our intention to create a training environment that mimics, as closely and safely as possible, a real-world incident. To maintain realism, only exercise controllers should interact with participants, and these interactions should be limited. Other than safety concerns, no other interaction between players and exercise control should exist. Injects will be delivered in a way that mimics the real world; injects will be given an opportunity to develop organically, and the exercise will be free play. Players are encouraged to use principles from ICS, and their agency plans, to react to situations. Interagency and multijurisdictional play is encouraged. Controllers will not engage in the tactical directions of responders under any circumstance, other than regarding safety concerns. Units should complete the demobilization process, and return to their departure locations safely.		
General Situational Awareness: All participants must maintain good situational awareness; consider safety in every action and decision. Take the time to look out for yourself and those around you. Speed limits must be strictly adhered to. All exercise personnel must complete the demobilization process before leaving MUTC/COB Panther. Be careful, be alert – Alert today, alive tomorrow!		
Weather: Thursday – Mostly-sunny, with a high temperature reaching into the mid-70s.		
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Approved Site Safety Plan(s) Located at:		
6. Incident Action Plan (the items checked below are included in this Incident Action Plan):		
X ICS 203 X ICS 204 X ICS 205 X ICS 205A X ICS 206	<input type="checkbox"/> ICS 207 X ICS 208 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather Forecast/Tides/Currents	Other Attachments: x Blank ICS Form 214 _____ x Demobilization Schedule _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
7. Prepared by: Name: M Livingston _____ Position/Title: PSC _____ Signature: _____		
8. Approved by Incident Commander: Name: _____ Signature: _____		
ICS 202	IAP Page 2	Date/Time: _____

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 09/26/2013 Time From: 0600		Date To: 09/26/2013 Time To: 2000	
3. Incident Commander(s) and Command Staff:			7. Operations Section:		
IC/UCs	Randy Collins	Chief	Rob Puckett		
		Deputy	Lauren Taverna		
Deputy	Gerri Husband	Staging Area	Kaelea Wilkerson		
Safety Officer	Erick Shell	Branch	Controller & Evaluator		
Public Info. Officer		Branch Director	Natasha Ayers		
Liaison Officer	Sara Vasquez	Deputy	A/ Mark Olson	IBEAM/ Jim Hawkins	
4. Agency/Organization Representatives:		Division/Group	B/ Dan Laux	SpecRescue/Dean Paderick	
Agency/Organization	Name	Division/Group	C/ Rick Emerick	INDOT/T. Vanderpool	
AKIMA	Mike Kozlik	Division/Group	D/ Col. J. Luckett		
IPSC	Steve Skinner	Division/Group	AHIMT/ Jim Grant		
MUTC	Sgt. Jones	Division/Group			
		Branch	Role Player		
		Branch Director	Mike Kozlik		
		Deputy			
5. Planning Section:		Division/Group			
Chief	Mark Livingston	Division/Group			
Deputy		Division/Group			
Resources Unit		Division/Group			
Situation Unit	Kirk Hinz	Division/Group			
Documentation Unit	Scott Huffman	Branch	SimCell		
Demobilization Unit	Ashley Holcomb	Branch Director	Jenn Tobey		
Technical Specialists	Pam Chadsey/IT	Deputy	EOC/Karrie Kashdollar	Town Officials/ Arvin Copeland	
		Division/Group	JIC/John Erickson	COMMS/ S Skinner	
		Division/Group	Hospital/ Liz Fiato		
		Division/Group			
6. Logistics Section:		Division/Group			
Chief	Jon Snell	Division/Group			
Deputy	Amy Lindsey	Air Operations Branch			
Support Branch		Air Ops Branch Dir.			
Director					
Supply Unit	Karen Allen				
Facilities Unit	Janice Lee	8. Finance/Administration Section:			
Ground Support Unit	Rachel Miller	Chief	Traci Wright		
Service Branch		Deputy			
Director		Time Unit			
Communications Unit		Procurement Unit			
Medical Unit	Jennings Co EMS	Comp/Claims Unit			
Food Unit		Cost Unit			
9. Prepared by: Name: M Livingston _____ Position/Title: PSC _____ Signature: _____					
ICS 203		IAP Page 3		Date/Time: _____	

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3. Branch: C&E Division: Group: AHIMT Staging Area:																
4. Operations Personnel: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;"></th> <th style="width: 40%; text-align: left;"><u>Name</u></th> <th style="width: 40%; text-align: left;"><u>Contact Number(s)</u></th> </tr> <tr> <td>Operations Section Chief:</td> <td>Lauren Taverna</td> <td>7TAC52/317-518-0227</td> </tr> <tr> <td>Deputy Ops Sect Chief:</td> <td>Rob Puckett</td> <td>7TAC52/317-605-2212</td> </tr> <tr> <td>Branch Director:</td> <td>Natasha Ayers</td> <td>7TAC51/ 317-771-3598</td> </tr> <tr> <td>Division/Group Supervisor:</td> <td>Jim Grant</td> <td>7TAC51/715-493-9137</td> </tr> </table>							<u>Name</u>	<u>Contact Number(s)</u>	Operations Section Chief:	Lauren Taverna	7TAC52/317-518-0227	Deputy Ops Sect Chief:	Rob Puckett	7TAC52/317-605-2212	Branch Director:	Natasha Ayers	7TAC51/ 317-771-3598	Division/Group Supervisor:	Jim Grant	7TAC51/715-493-9137
	<u>Name</u>	<u>Contact Number(s)</u>																		
Operations Section Chief:	Lauren Taverna	7TAC52/317-518-0227																		
Deputy Ops Sect Chief:	Rob Puckett	7TAC52/317-605-2212																		
Branch Director:	Natasha Ayers	7TAC51/ 317-771-3598																		
Division/Group Supervisor:	Jim Grant	7TAC51/715-493-9137																		
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information															
Resource Identifier	Leader																			
AHIMT Mentors	Steve Goldman	12	989-305-0868	Building 91																
AHIMT Evaluators	Melissa Buell	4	812-251-1355	Building 91																

6. Work Assignments:
 Provides an environment for Incident Management Teams to conduct operations and demonstrate capabilities of their team. Enable the AHIMT members to demonstrate tasks. Evaluate AHIMT members and document lessons learned and best practices for AAR purposes. Sign any task books if tasks are demonstrated by AHIMT members that have them.

7. Special Instructions:
 The effective operation of the AHIMT is critical to this exercise. The AHIMT must not be allowed to stall out or become indecisive. Attempt to create injects to the AHIMT to perform expected player actions. AS a last resort, mentor AHIMT members to get them functioning. Make sure to follow the Master Scenario Events List as the framework of the exercise scenario. Golf Carts must be assigned through STAM and returned to staging immediately after exercise play is over.

8. Communications (radio and/or phone contact numbers needed for this assignment):
 Name /Function Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Jim Grant 715-493-9137 /

9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____

ICS 204	IAP Page 4	Date/Time:
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ASSIGNMENT LIST (ICS 204)

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Division/Group Supervisor:	Mark Olson	7TAC52/ 317-517-8082																		
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information															
Resource Identifier	Leader																			
Controller	Larry Cassagne	1	7TAC52/ 317-417-3696																	
Law Evaluator	Chip Sunier	1	812-526-0013																	
Fire Evaluator	Fabian Martinez	1	219-689-7118																	
EMS Evaluator	Jason Smith	1	317-460-5942																	

6. Work Assignments:

Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGS and known best practices. Evaluate resources response to each event. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to the players. Use role players, other responders, SIMCECLL etc to the extent possible. Coordinate such actions through the C&E Branch Director. To the extent possible, ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Golf carts must be assigned through the STAM and returned to staging immediately after exercise play is over.

7. Special Instructions:

Division A will be responsible for Inject V, which is set to begin at 1200, and end around 1330. Please use corresponding playbook and training lane to find detailed inject information and exercise evaluation guides for this inject.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Mark Olson 7TAC52	/	

9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____

ICS 204	IAP Page 5	Date/Time: Date
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ASSIGNMENT LIST (ICS 204)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3. Branch: C&E Division: B Group: Staging Area:																
4. Operations Personnel: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;"></th> <th style="width: 40%; text-align: left;"><u>Name</u></th> <th style="width: 45%; text-align: left;"><u>Contact Number(s)</u></th> </tr> <tr> <td>Operations Section Chief:</td> <td>Lauren Taverna</td> <td>7TAC52/317-518-0227</td> </tr> <tr> <td>Deputy Ops Sect Chief:</td> <td>Rob Puckett</td> <td>7TAC52/317-605-2212</td> </tr> <tr> <td>Branch Director:</td> <td>Natasha Ayers</td> <td>7TAC52/ 317-771-3598</td> </tr> <tr> <td>Division/Group Supervisor:</td> <td>Dan Laux</td> <td>7TAC52/ 989-370-0440</td> </tr> </table>							<u>Name</u>	<u>Contact Number(s)</u>	Operations Section Chief:	Lauren Taverna	7TAC52/317-518-0227	Deputy Ops Sect Chief:	Rob Puckett	7TAC52/317-605-2212	Branch Director:	Natasha Ayers	7TAC52/ 317-771-3598	Division/Group Supervisor:	Dan Laux	7TAC52/ 989-370-0440
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Branch Director:	Natasha Ayers	7TAC52/ 317-771-3598																		
Division/Group Supervisor:	Dan Laux	7TAC52/ 989-370-0440																		
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information															
Resource Identifier	Leader																			
Controller	Tom Ecker	1	7TAC52/ 765-642-8727																	
Law Evaluator	Jim Martin	1	812-499-3023																	
Fire Evaluator	Bill Banta	1	502-523-1510																	
EMS Evaluator	Robin Stump	1	317-753-3750																	

6. Work Assignments:
 Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGS and known best practices. Evaluate resources response to each event. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to the players. Use role players, other responders, SIMCECLL etc to the extent possible. Coordinate such actions through the C&E Branch Director. To the extent possible, ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Golf carts must be assigned through the STAM and returned to staging immediately after exercise play is over.

7. Special Instructions:
 Division B will be controlling and evaluating Inject D, which will begin at 0900, and is set to end around 1130. The division will also control and evaluate Inject U, which will begin at 1400, and conclude at 1600. Please use corresponding playbook and training lane to find detailed inject information and exercise evaluation guides for this inject.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Erica McDaniel 7TAC52	/	

9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____

ICS 204	IAP Page 6	Date/Time:
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5. Resources Assigned: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Resource Identifier</th> <th style="width: 20%;">Leader</th> <th style="width: 10%; text-align: center;"># of Persons</th> <th style="width: 30%;">Contact (e.g., phone, pager, radio frequency, etc.)</th> <th style="width: 20%;">Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information</th> </tr> <tr> <td>Controller</td> <td>Erica McDaniel</td> <td style="text-align: center;">1</td> <td>7TAC52/ 317-476-1055</td> <td>Building 1 Gymnasium</td> </tr> <tr> <td>Law Evaluator</td> <td>Dave Robinson</td> <td style="text-align: center;">1</td> <td>317-452-2344</td> <td>Building 1 Gymnasium</td> </tr> <tr> <td>Fire Evaluator</td> <td>Shawn Blair</td> <td style="text-align: center;">1</td> <td>765-808-4037</td> <td>Building 1 Gymnasium</td> </tr> <tr> <td>EMS Evaluator</td> <td>Steve Gressmire</td> <td style="text-align: center;">1</td> <td>317-452-0691</td> <td>Building 1 Gymnasium</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>			Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	Controller	Erica McDaniel	1	7TAC52/ 317-476-1055	Building 1 Gymnasium	Law Evaluator	Dave Robinson	1	317-452-2344	Building 1 Gymnasium	Fire Evaluator	Shawn Blair	1	765-808-4037	Building 1 Gymnasium	EMS Evaluator	Steve Gressmire	1	317-452-0691	Building 1 Gymnasium																												
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6. Work Assignments: Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGS and known best practices. Evaluate resources response to each event. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to the players. Use role players, other responders, SIMCECLL etc to the extent possible. Coordinate such actions through the C&E Branch Director. To the extent possible, ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Golf carts must be assigned through the STAM and returned to staging immediately after exercise play is over.																																																							
7. Special Instructions: Division C will be controlling and evaluating Inject T, which will kick off at 0930, and is set to end around 1100. Division C will also control and evaluate Inject G, which is set to begin at 1430, and conclude at 1700; Division C will also control and evaluate Inject 1, which is scheduled to begin at 1700, and conclude at 1830. Please use corresponding playbook and training lane to find detailed inject information and exercise evaluation guides for this inject.																																																							
8. Communications (radio and/or phone contact numbers needed for this assignment): <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Name</td> <td style="width: 25%;">/Function</td> <td style="width: 50%;">Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</td> </tr> <tr> <td>7TAC52 Rick Emerick</td> <td>/</td> <td></td> </tr> </table>						Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	7TAC52 Rick Emerick	/																																													
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1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3. Branch: C&E Division: Staging (Unassigned) Group: Staging Area: Bldg 403																
4. Operations Personnel: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;"></th> <th style="width: 40%; text-align: left;"><u>Name</u></th> <th style="width: 40%; text-align: left;"><u>Contact Number(s)</u></th> </tr> <tr> <td>Operations Section Chief:</td> <td>Lauren Taverna</td> <td>7TAC52/317-518-0227</td> </tr> <tr> <td>Deputy Ops Sect Chief:</td> <td>Rob Puckett</td> <td>7TAC52/317-605-2212</td> </tr> <tr> <td>Branch Director:</td> <td>Natasha Ayers</td> <td>7TAC52/317-771-3598</td> </tr> <tr> <td>Division/Group Supervisor:</td> <td colspan="2"></td> </tr> </table>							<u>Name</u>	<u>Contact Number(s)</u>	Operations Section Chief:	Lauren Taverna	7TAC52/317-518-0227	Deputy Ops Sect Chief:	Rob Puckett	7TAC52/317-605-2212	Branch Director:	Natasha Ayers	7TAC52/317-771-3598	Division/Group Supervisor:		
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Division/Group Supervisor:																				
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information															
Resource Identifier	Leader																			
Controller	Dave McGuire	1	7TAC52/ 317-517-4082	Building 1 Gymnasium																
EMS Evaluator	Brian Albrecht	1	317-987-4545	Building 1 Gymnasium																

6. Work Assignments:

Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGS and known best practices. Evaluate resources response to each event. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to the players. Use role players, other responders, SIMCECLL etc to the extent possible. Coordinate such actions through the C&E Branch Director. To the extent possible, ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Golf carts must be assigned through the STAM and returned to staging immediately after exercise play is over.

7. Special Instructions:

The Staged (Unassigned) Team is to report to Staging where they will remain until requested by the OSC, to support a division needing additional tactical resources. Unassigned resources must remain in Staging, and be ready for assignment within three (3) minutes of assignment. STAM Kaelea Wilkerson, who will have radio communications with the OSC and RESL, will communicate assignments to unassigned resources.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Dave McGuire	7TAC52	/

9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____

ICS 204	IAP Page 8	Date/Time:
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				Division: D	
				Group:	
				Staging Area:	
		Name		Contact Number(s)	
Operations Section Chief:		Lauren Taverna		7TAC52/317-518-0227	
Deputy Ops Sect Chief:		Rob Puckett		7TAC52/317-605-2212	
Branch Director:		Natasha Ayers		317-771-3598	
Division/Group Supervisor:		Colonel Luckett		317-234-5591	
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information
Resource Identifier	Leader				
Division D Support	Dave Barrabee	1		7TAC51/317-694-8529	North Vernon Airport (COB Panther)
6. Work Assignments:					
Provide for the needs of the district resources in camp.					
7. Special Instructions: Division D will host both districts and state agencies. Players will set up camp, park, register and eat at COB Panther.					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)			
/					
9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____					
ICS 204		IAP Page 9		Date/Time: Date	

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3.											
4. Operations Personnel: <table border="1"><thead><tr><th>Name</th><th>Contact Number(s)</th></tr></thead><tbody><tr><td>Operations Section Chief: Lauren Taverna</td><td>7TAC52/317-518-0227</td></tr><tr><td>Deputy Ops Sect Chief: Rob Puckett</td><td>7TAC52/317-605-2212</td></tr><tr><td>Branch Director: Natasha Ayers</td><td>7TAC52/317-771-3598</td></tr><tr><td>Division/Group Supervisor: John Buckman</td><td>7TAC52/317-417-3695</td></tr></tbody></table>				Name	Contact Number(s)	Operations Section Chief: Lauren Taverna	7TAC52/317-518-0227	Deputy Ops Sect Chief: Rob Puckett	7TAC52/317-605-2212	Branch Director: Natasha Ayers	7TAC52/317-771-3598	Division/Group Supervisor: John Buckman	7TAC52/317-417-3695	Branch: C&E	
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				Operations Section Chief: Lauren Taverna	7TAC52/317-518-0227										
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Branch Director: Natasha Ayers	7TAC52/317-771-3598														
Division/Group Supervisor: John Buckman	7TAC52/317-417-3695														
Division:															
Group: Fire															
Staging Area:															
5. Resources Assigned:				Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information											
Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)												
Fire Controller	John Buckman	1	7TAC52/ 317-517-4082												
Fire Evaluator	Dave Probo	2	7TAC52/317-508-9165												
6. Work Assignments: Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGS and known best practices. Evaluate resources response to each event. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to the players. Use role players, other responders, SIMCELL etc to the extent possible. Coordinate such actions through the C&E Branch Director. To the extent possible, ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Golf carts must be assigned through the STAM and returned to staging immediately after exercise play is over.															
7. Special Instructions: Fire Group will be responsible for Inject O, which is set to begin at 0800 and concluding at 1000. The will also be responsible for Inject B, which is set to begin at 1430, and conclude at 1600. Please use corresponding playbook and training lane to find detailed inject information and evaluation guides for these injects.															
8. Communications (radio and/or phone contact numbers needed for this assignment): Name _____ /Function _____ Primary Contact: indicate cell, pager, or radio (frequency/system/channel) _____ John Buckman 7TAC52 /															
9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____															
ICS 204		IAP Page 10		Date/Time:											

ASSIGNMENT LIST (ICS 204)

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ASSIGNMENT LIST (ICS 204)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3. Branch: SIMCELL Division: Group: COMMS. Staging Area:																																					
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7. Special Instructions: Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to players. Communications failures are set to happen on Monday September 24 th at 1000 and 1500 for 30 minutes.																																									
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Division/Group Supervisor:	Liz Fiato	317-431-6911																		
5. Resources Assigned:			# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information															
Resource Identifier	Leader																			
Hospital Controller	Liz Fiato	1	317-431-6911	Hospital																
Hospital Evaluator	Jeremy Luther	3	812-824-7975	Hospital																

6. Work Assignments:

Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGs and known best practices of each discipline. Control and evaluate responders' ability to use interoperable communications. Control and evaluate responders' abilities to deal with communications failures. Evaluate the ability to demonstrate and maintain a continuous flow of critical information among multi jurisdictional and multi disciplinary emergency responders, command posts, agencies, and governmental officials for the duration of emergency responders, command posts, agencies, and governmental officials for the duration of emergency response operations. To the extent possible ensure scenarios are "joint operations" requiring multiple disciplines at each scenario. Avoid making direct injects or instructions to players. Use role players, other responders, SIMCELL etc to the extent possible. Coordinate such actions through the C&E Branch Director.

7. Special Instructions:

Evaluate hospital actions for patients brought to hospital for treatment. Currently, there are no planned injects for the Hospital Group. Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to players.

8. Communications (radio and/or phone contact numbers needed for this assignment):

Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)
Liz Fiato 7TAC52	/	
	/	
	/	
	/	

9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____

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Date/Time:

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Volunteer Insp. Coordinator	Dean Illingworth	1	317-232-1400	Building 1 Gymnasium																																																
State Employee Insp. Coordinator	Pam Bright	1	317-502-5564	Building 1 Gymnasium																																																
6. Work Assignments: Ensure the safety and health of all exercise players. Document best practices and lessons learned in accordance with EEGs and known best practices of each discipline. Evaluate the ability to demonstrate and conduct damage and safety assessments of civil, commercial and residential infrastructure and to perform structural inspections and mitigation activities. Evaluate resources and response to each event. Embed your controllers and evaluators with IBEAM participants.																																																				
7. Special Instructions: Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to players. IBEAM will be conducting building assessments each day as well as windshield inspections. IBEAM should be called in when the stability of a building is called into question.																																																				
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4. Operations Personnel:					
		<u>Name</u>		<u>Contact Number(s)</u>	
Operations Section Chief:		Lauren Taverna		7TAC52/317-518-0227	
Deputy Ops Sect Chief:		Rob Puckett		7TAC52/317-605-2212	
Branch Director:		Natasha Ayers		317-771-3598	
Division/Group Supervisor:		Tom Vanderpool		317-402-4458	
5. Resources Assigned:					
Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	
Route Assessment Controller	Tom Vanderpool	1	317-402-4458	Building 1 Gymnasium	
Debris Removal Controller	Robert Demuth	1	317-519-1499	Building 1 Gymnasium	
Field Liaison Officer	Lyle Sadler	1	317-509-4714	Building 1 Gymnasium	
6. Work Assignments: Ensure the health and safety of all exercise players. Document best practices and lessons learned in accordance with EEGs and known best practices of each discipline. Evaluate the ability to conduct Level I road/bridge assessments to assess and where possible clear INDOT roads and bridges to allow for safe travel in times of disaster. In accordance with INDOT policies and procedures demonstrate the ability to remove debris, both leafy and woody to open transportation routes- both on state owned/managed right-of-way as well as local jurisdiction controlled highways. Evaluate resources and response to each event.					
7. Special Instructions: Provide all documentation to the Documentation Unit Leader at the end of each operational period. INDOT teams will be participating only on Tuesday and Thursday. Their mission will be debris management and route assessment. They will also be injecting scenarios which involve bridge stability. INDOT will be performing night operations, please be aware of your surroundings and always wear PPE when going outside after dark!					
8. Communications (radio and/or phone contact numbers needed for this assignment):					
Name		/Function		Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	
7TAC52		/			
		/			
9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____					
ICS 204		IAP Page 15		Date/Time:	

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Resource Identifier	Leader																			
JIC Evaluators	John Erickson	6	317-690-4698																	

6. Work Assignments:
 Control and evaluate the operations of the JIC. Document best practices and lessons learned in accordance with EEGs and known best practices of each discipline. Evaluate resources and response to each event. Coordinate closely with JIC SIMCELL groups to ensure the JIC is being appropriately and adequately tested. Utilize role players and the SIMCELL to push responders to present expected role player actions. If responders are not engaged, notify C&E Branch Director for further analysis and ideas to engage responders.

7. Special Instructions:
 Provide all documentation to the Documentation Unit Leader at the end of each operational period. Avoid making direct injects or instructions to players. Set up and operate a fully functioning Joint Information Center. John Erickson will be injecting emails, text messages, phone calls, and other media related events into the JIC, to establish exercise play. Questions regarding the JIC should be directed to John Erickson.

8. Communications (radio and/or phone contact numbers needed for this assignment):			
Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	
John Erickson 317-690-4698	/		
	/		
	/		
	/		

9. Prepared by:	Name: M Livingston	Position/Title: PSC	Signature: _____
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ICS 204	IAP Page 16	Date/Time:
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Division/Group Supervisor: Dean Paderick	757-435-6615																																												
5. Resources Assigned:		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Resource Identifier</th> <th style="width: 20%;">Leader</th> <th style="width: 10%;"># of Persons</th> <th style="width: 30%;">Contact (e.g., phone, pager, radio frequency, etc.)</th> <th style="width: 20%;">Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information</th> </tr> </thead> <tbody> <tr> <td>Logistics</td> <td>Dean Paderick</td> <td>6</td> <td>7TAC54</td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	Logistics	Dean Paderick	6	7TAC54																																	
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Logistics	Dean Paderick	6	7TAC54																																										
6. Work Assignments: Ensure the health and safety of all exercise players. Document best practices and lessons learned in accordance with EEGs and known best practices of each discipline. Evaluate the KSAs of special operations responders performing high-angle/low-angle rope rescue, structural collapse, search and rescue, water rescue and entry, and communication techniques. Evaluate resources and response to each event.																																													
7. Special Instructions: Provide logistical support to animal rescue scenario cleanup.																																													
8. Communications (radio and/or phone contact numbers needed for this assignment): <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name</td> <td style="width: 20%;">/Function</td> <td style="width: 50%;">Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</td> </tr> <tr> <td>Dean Paderick 757-435-6615/ 7TAC54</td> <td>/</td> <td></td> </tr> </table>						Name	/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	Dean Paderick 757-435-6615/ 7TAC54	/																																			
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Dean Paderick 757-435-6615/ 7TAC54	/																																												
9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____																																													
ICS 204		IAP Page 17		Date/Time:																																									

ASSIGNMENT LIST (ICS 204)

1. Incident Name: Tipton Twister		2. Operational Period: Date From: 9/26/2013 Date To: 9/26/2013 Time From: 0600 Time To: 2000		3.	
4. Operations Personnel:		<u>Name</u> Operations Section Chief: Lauren Taverna Deputy Ops Sect Chief: Rob Puckett Branch Director: Jenn Tobey Division/Group Supervisor: Arvin Copeland		<u>Contact Number(s)</u> 7TAC52/317-518-0227 7TAC52/317-605-2212 574-242-2445 317-650-3930	
5. Resources Assigned:		# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)	Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information	
Resource Identifier	Leader				
Mayor Actor	Arvin Copeland	1	317-650-3930	Building 75 Chapel	
Police Chief Actor	Ron Patrick	1	574-242-2445	Building 75 Chapel	
Fire Chief Actor	Jim Greeson	1	317-690-1537	Building 75 Chapel	
6. Work Assignments: Ensure the safety and health of all exercise players.					
7. Special Instructions: Provide all documentation to the Documentation Unit Leader at the end of each operational period. Use the specified ICS Form 201, developed for Town Officials, to brief exercise participants about the scenario, including what has already occurred. Use role players, other responders, SIMCELL, etc. to create realism, to the extent possible.					
8. Communications (radio and/or phone contact numbers needed for this assignment): Name _____ /Function _____ Primary Contact: indicate cell, pager, or radio (frequency/system/channel) <u>7TAC52/OPS Jenn Tobey</u> _____ _____ _____ / _____ /					
9. Prepared by: Name: M Livingston Position/Title: PSC Signature: _____					
ICS 204		IAP Page 18		Date/Time: _____	

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

INCIDENT RADIO COMMUNICATIONS PLAN			Incident Name Tipton Twister - 2013 Exercise Control			Date/Time Prepared 09/24/13 0900		Operational Period Date/Time 9/26/2013 0600 -2000	
Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq N or W	RX Tone/NAC	TX Freq N or W	Tx Tone/NAC	Mode A, D or M	Remarks
1	Tactical	7TAC 51	Command & Jennings Co. EMS	769.14375 N	\$F7E	799.14375 N	\$293	D	Stand-alone repeater #1
2	Tactical	7TAC51D	TAC51 Back-up	799.14375 N	\$F7E	799.14375 N	\$293	D	Direct
3	Tactical	7TAC52	Scenario OPS	769.64375 N	\$F7E	799.64375 N	\$293	D	Stand-alone repeater #2
4	Tactical	7TAC52D	TAC52 Back-up	799.64375 N	\$F7E	799.64375 N	\$293	D	Direct
5	Tactical	7TAC53	Logistics Staff	770.14375 N	\$F7E	800.14375 N	\$293	D	Stand-alone repeater #3
6	Tactical	7TAC53D	TAC53 Back-up	800.14375 N	\$F7E	800.14375 N	\$293	D	Direct
7	Tactical	7TAC54	Spec Rescue/AKIMA	770.64375 N	\$F7E	800.64375 N	\$293	D	Stand-alone repeater #4
8	Tactical	7TAC54D	TAC54 Back-up	800.64375 N	\$F7E	800.64375 N	\$293	D	Direct
9	Tactical	SW-6	Reservoir Control	N/A	N/A	N/A	N/A	A	IPSC Trunked System
10	Tactical	SW-7	Convoys	N/A	N/A	N/A	N/A	A	IPSC Trunked System
11	Tactical	USFS 1	Exercise Eval	163.1000 N	None	163.1000 N	None	A	Primary
12	Tactical	USFS 2	Exercise Eval	168.3500 N	None	168.3500 N	None	A	Secondary
13	Tactical	7TAC76D	Simcell/EOC Link	774.25625 N	\$F7E	774.25625 N	\$293	D	Scenario exchange link
Prepared By (Communications Unit) D. Steven Skinner, COML						Incident Location: MUTC-Butlerville County : Jennings State: IN			

The convention calls for frequency lists to show four digits after the decimal place, followed by either an "N" or a "W", depending on whether the frequency is narrow or wide band. Mode refers to either "A" or "D" indicating analog or digital (e.g. Project 25) or "M" indicating mixed mode. All channels are shown as if programmed in a control station, mobile or portable radio. Repeater and base stations must be programmed with the Rx and Tx reversed.

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name: Tipton Twister	2. Operational Period: Date From: 9/26/2013 Time From: 0600	Date To: 9/26/13 Time To: 2000
3. Basic Local Communications Information:		
Incident Assigned Position	Name (Alphabetized)	Method(s) of Contact (phone, pager, cell, etc.)
Exercise Commander	Randy Collins	317-605-7187
Dep Exercise Commander	Gerri Husband	317-517-2844
SOFR	Erick Shell	317-979-2059
PIO	Don Watson	317-670-3180
LOFR	Sara Vasquez	812-360-4362
Akima Agency Rep	Mike Kozlik	205-332-5524
Dep OSC	Lauren Taverna	317-518-0227
OSC	Rob Puckett	317-605-2212
C&E Branch Director	Natasha Ayers	317-771-3598
Division A Supervisor	Mark Olson	317-517-8082
Division B Supervisor	Dan Laux	989-370-0440
Division C Supervisor	Rick Emerick	812-620-1282
Division D Supervisor	Col. Joe Luckett	317-710-4647
Fire Grp Sup	John Buckman	317-417-3695
Unassigned Controller	Dave McGuire	317-517-4082
IBEAM Controller	Lonnie Lagle	317-417-3708
AHIMT Grp Sup	Jim Grant	715-493-9137
Comms Eval Grp	Steve Skinner	317-450-0496
INDOT Controller	Tom Vanderpool	317-402-4458
JIC C&E	John Erickson	317-690-4698
PSC	Mark Livingston	317-601-1310
SITL	Kirk Hinz	317-605-7043
DOCL	Scott Huffman	317-607-4641
DMOB	Ashley Holcomb	317-431-4864
LSC	Jon Snell	317-501-4270
Deputy LSC	Amy Lindsey	317-509-7101
Supply Unit Leader	Karen Allen	317-464-7043
Facilities Unit Leader	Janice Lee	317-605-7005
Ground Support Unit Leader	Rachel Miller	317-432-9433
4. Prepared by: Name: M Livingston _____ Position/Title: PSC _____ Signature: _____		
ICS 205A	IAP Page 20	Date/Time: _____

Medical Plan (ICS 206)

1. Incident Name: Tipton Twister		2. Operational Period:		Date From: 9/26/2013 Time From: 0600	Date To: 9/26/2013 Time To: 2000
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Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
Jennings County ALS 1	MUTC Firehouse BLDG 12	Command Phone / 7TAC51	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Jennings County ALS 2	MUTC Firehouse BLDG 12	Command Phone / 7TAC51	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Jennings County EMS	S. State Street North Vernon, IN	812-346-4715	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lifeline Columbus	Columbus IN	1-800-382-9922	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
St. Vincent StatFlight	North Vernon, IN	866-574-4633	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):

Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
Jennings County ALS 1	MUTC Firehouse Bldg 12	Command Phone	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Jennings County ALS 2	MUTC Firehouse Bldg 12	Command Phone	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:

Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
St. Vincent Jennings	US 50 Butlerville, IN 39°00'38.40" N, 85° 38' 26.08	812-352-4200	3 min	10min	<input type="checkbox"/> Yes Level: ____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Schneck Memorial	411 Tipton, Seymour IN 38° 57' 17.23" N, 85° 53'36.38"	812-522-2349	5 min	20 min	<input type="checkbox"/> Yes Level: ____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Columbus Regional	2400 E 17 th , Columbus, IN 39° 12' 58.07" N, 86° 53' 43.67"	812-379-4441	5 min	30 min	<input type="checkbox"/> Yes Level: ____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
IU Health Methodist	21 st & I65, Indianapolis, IN 39° 47' 20.67" N, 86° 09' 46.77"	317-962-2000	25 min	80 min	<input type="checkbox"/> Yes Level: ____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Wishard Memorial	1001 W. 10 th St. Indianapolis, IN	317-639-6671	30 min	97 min	<input type="checkbox"/> Yes Level: ____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

6. Special Medical Emergency Procedures:

For an emergency that requires assistance, the phrase "real-world emergency" should be used in all instances.

The following procedures should be used in case of a real-world emergency during the exercise:

- Anyone who observes a participant who is seriously injured must immediately notify the nearest controller.
- Once a controller has been notified, if possible, aid should be rendered to an extent that does not exceed the individual's training.
- The notified controller will initiate the "real-world emergency" broadcast on the controller radio network, and provide the following information to the C&E Branch Director:
 - Venue and function,
 - Location within the venue and function,
 - Patient condition, and
 - Medical requirements.

The control cell will be notified as soon as possible if a real-world emergency occurs. If the nature of the emergency requires suspension of the exercise at the venue or function, all exercise activity at the facility will immediately cease, upon the direction of the Operations Section Chief. Exercise play may resume at that function after the situation has been addressed and the notice has been given by the Operations Section Chief. If a real world emergency occurs that affects the entire exercise, the exercise may be suspended or terminated, at the discretion of the exercise Director and Operations Section Chief. Notification will be made by the control cell.

****For a real-world animal emergency – contact Dr. Steve Sollman, D.V.M., (812) 346-3203**

7. Prepared by: PSC	Name: M Livingston	Signature: _____
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8. Approved by (Safety Officer):	Name: Mike Shantz	Signature: _____
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ICS 206	IAP Page 21	Date/Time: 9/25/2013
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SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name: Tipton Twister	2. Operational Period: Date From: 9/26/13 Time From: 0600	Date To: 9/26/13 Time To: 2000
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan: <p>Numerous Safety and Health hazards were caused or created by a tornado. Conducting emergency response activities in an environment full of recognized hazards creates ample opportunity for injury and harm. Awareness of those hazards may help prevent or mitigate injuries to responders and damage to equipment. Examples of hazards one may encounter are:</p> <p>Fire Exposure: Active fire behavior may be encountered in some areas of the city. Consider safety when selecting objectives and tactics. L-C-E-S (Look-out, Communications, Escape routes, Safety zones) implementation.</p> <p>Tornado Debris: The debris may be sharp, loose, and unstable in many places. It will be difficult to drive, park, walk, and work in areas where this material is present. Falls into or onto debris can result in broken or sprained ankles and wrists, scrapes, cuts and bruises or worse.</p> <p>Damaged Buildings: Unstable debris piles and damaged structures have the potential to collapse on those inside or nearby. This could cause severe crushing injuries up to and including death. Use extreme caution when performing search and rescue efforts in and around damaged buildings.</p> <p>Damaged Utilities and Roads: Numerous power lines are down. Always treat power lines as live and stay clear. Damage to other utilities and infrastructure may create additional, unique hazards (fire, collapse). Be careful of damage to roads and or objects and debris in the roadways. Use tactical driving.</p> <p>Heat and Fatigue: Working extended periods wearing protective gear including personal protective equipment can be hot and burdensome. Set and follow work/rest schedules to provide an opportunity for responder rehab. Do not wait until you are thirsty to start drinking, hydrate, hydrate, hydrate.</p> <p>Water Rescue Operations: Personal flotation devices (PFD's) are mandatory within 10 feet of the water line for all involved. All others stay clear.</p> <p>Traffic Rules: Obey all MUTC speed limits and traffic regulations without question.</p> <p>Golf Carts / ATV's: Familiarize yourself with operator instructions. Do not overload, do not speed.</p> <p>Real World Emergencies: Announce "Real World Emergency" over the radio for such. Clear radio channel for emergency traffic.</p> <p>Maintain general awareness of snakes and insects</p>		
5. Prepared by: Name: M Schantz Position/Title: SOFR Signature: _____		
ICS 208	IAP Page 22	Date/Time: 09/25/2013 _____

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Demobilization Schedule

All units are expected to demobilize, using the ICS Form 221, through the Exercise Check-in area at COB Panther. All individuals/crews/units will be required to secure signatures verifying all required, equipment, documentation, site rehab, etc. has been completed prior to departure from COB Panther/MUTC.

Wednesday, September 25, 2013

District 1 (AM) – Successfully Demobilized

District 3 (AM) – Successfully Demobilized

Thursday, September 26, 2013

District 4

ISDH

BOAH

Friday, September 27, 2013

Eastern Area IMT

District 9

IBEAM

Note: All Exercise personnel must complete the demobilization process, which will include:

- Successfully completing the ICS Form 221 (obtaining all required signatures)
- Complete all required turn-in activities:
 - Clean accommodations, turn in keys to FACL
 - Turn in all issued equipment to the GSUL
 - Turn in all issued radio equipment to COML
 - Turn in all required documentation (ICS Form 214s) to DOCL
 - Turn in all Crew Time Reports to FSC
 - Turn in completed ICS for 221 to DMOB
- Return to COB Panther, via shuttle:
 - To get identification swiped at Registration
 - Secure vehicle

ACTIVITY LOG (ICS 214)

1. Incident Name:						Tipton Twister					
2. Operational Period:											
Date From:	9/26/2013			Date To:	9/26/2013						
Time From:				Time To:							
3. Name:				4. ICS Position:				5. Home Agency (and Unit):			
6. Resources Assigned:											
Name				ICS Position				Home Agency (and Unit)			
7. Activity Log:											
Date/Time			Notable Activities								
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____											
ICS 214, Page 1						Date/Time: _____					

ACTIVITY LOG (ICS 214)

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